

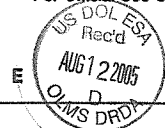
FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>5624</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>Louise</u> <u>Weissman</u> P.O. Box, Bldg., Room No., if any _____ Street <u>7212 Windsor Lane</u> City <u>Hyattsville</u> State <u>Maryland</u> ZIP Code + 4 <u>20782</u>	4. Name, file number, and address of labor organization. Name <u>SEIU</u> Labor Organization File Number <u>000-137</u> P.O. Box, Building and Room Number, if any _____ Street <u>1313 L Street NW</u> City <u>Washington</u> State <u>District of Columbia</u> ZIP Code + 4 <u>20005</u>
5. Position in labor organization. <u>Employee as of 2004 (now retired)</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name _____ Trade Name, if any: _____ P.O. Box, Bldg., Room No., if any _____ Street _____ City _____ State _____ ZIP Code + 4 _____	7.a. Nature of Interest, Transaction, or Income. _____ 7.b. Amount. _____

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed <u>Theresa L. Igouma</u>	On <u>8/8/05</u> Date	<u>(301) 985-1569</u> Telephone Number

Name of Person Filing Louise Weissman	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <u>Union Privilege</u></p> <p>Trade Name, if any: <u></u></p> <p>P.O. Box, Bldg., Room No., if any <u>Suite 300</u></p> <p>Street <u>1125 15th Street NW</u></p> <p>City <u>Washington</u></p> <p>State <u>District of Columbia</u> ZIP Code + 4 <u>20005</u></p>	<p>9. Business deals with:</p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <u></u></p> <p>Trade Name, if any: <u></u></p> <p>P.O. Box, Bldg., Room No., if any <u></u></p> <p>Street <u></u></p> <p>City <u></u></p> <p>State <u></u> ZIP Code + 4 <u></u></p>	<p>11.a. Nature of such dealing.</p> <p><u>Union Privilege is the not-for-profit company that develops member benefits for AFL-CIO affiliated unions. SEIU does not pay UP for its services. UP does provide certain financial support to SEIU to assist SEIU in carrying out member benefit programs.</u></p> <p>11.b. Approximate dollar value of such dealing. <u>Unknown</u></p> <p>12.a. Nature of interest held or income received.</p> <p><u>My husband works for UP and received compensation of \$91,507 for doing so. In addition, I served as the UP liason while at SEIU (an unpaid position) and recieved a \$100 award, three business lunches and hotel accomodations for a UP meeting for doing so.</u></p> <p>12.b. Amount. <u>\$91,980</u></p>

<p>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</p>	
<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name <u></u></p> <p>Trade Name, if any: <u></u></p> <p>P.O. Box, Bldg., Room No., if any <u></u></p> <p>Street <u></u></p> <p>City <u></u></p> <p>State <u></u> ZIP Code + 4 <u></u></p>	<p>14.a. Nature of payment.</p> <p><u></u></p>
<p>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment.</p> <p><u></u></p>